MOVING OR SELLING YOUR PROPERTY

Name: Spouse's Name:
Property Address:
Date of Birth: Employer:
Phone Number:
Email Address:

Have you previously had service with Greater Cincinnati Water Works? Yes No
If Yes, at what address?

COMPLETE ***ONE*** OF THE SECTIONS BELOW:

If moving into a property (*You* are the *Owner*):

Did you purchase this property? Yes No
Date to begin service:
Mailing address (if different from the property address):

If moving out of a property (*You* are the *Seller*):

Did you sell this property? Yes No
Requested final meter reading date:
Forwarding mailing address:
Name of new owner:

If renting or leasing (*You* are the *Tenant*):

Are you moving into this property? Move in date:
Are you moving out of this property? Move out date:
Forwarding mailing address:

****If you need the water turned off or on, please contact our office at 513-591-7700 between the hours of 7:30am-5:30pm, Monday – Friday (excluding holidays).****

SUBMIT